



Kathleen Sebelius, Governor
Roderick L. Bremby, Secretary

DEPARTMENT OF HEALTH
AND ENVIRONMENT

www.kdheks.gov

Division of Environment

COUNTY SOLID WASTE MANAGEMENT PLANNING COMMITTEE SUPPORT FORM

A Competitive Plan Implementation Grant Application cannot conflict with (or it must be generally identified within) a KDHE approved county or regional solid waste management plan (as mandated by K.S.A. 65-3405) or have broad statewide significance. Grant funds to any entity within the jurisdiction of such county or regional authority shall be withheld if a county or regional authority fails to comply with K.S.A. 65-3405

To ensure that this requirement is being met, and to ensure county solid waste management planning committee participation in the grant application process, the applicant must have the following form completed by the chairman of the county's Solid Waste Management Planning Committee, or under certain circumstances, the county commission.

If the county commission completes the form, please provide an explanation why the chairman of the Solid Waste Management Planning Committee was not available. The chairman of the planning committee or the county commission may either return this form to the applicant or send it directly to:

Kansas Department of Health and Environment
Bureau of Waste Management
ATTN: Competitive Plan Implementation Grant Program
1000 SW Jackson, Suite 320
Topeka, Kansas 66612-1366

****NOTE**** *the application will be considered incomplete and ineligible for funding unless this completed form is received on or before the final review of applications in August.* Any questions can be directed to the Waste Reduction, Compliance and Enforcement Section at 785-296-1600.

This form may be submitted separately after the May 18, 2008 postmark deadline to accommodate Solid Waste Management Planning Committee and/or County Commission meetings. Please contact the Bureau of Waste Management to inform the Program Manager of a proposed submission date.

The original Grant Application MUST BE postmarked by May 18, 2008 to be eligible for SFY 09.

Don't forget to
complete the attached
support form!



**Bureau of Waste Management
GRANT PROGRAM
State Fiscal Year 2009 Application Form**

COUNTY SOLID WASTE MANAGEMENT PLANNING COMMITTEE SUPPORT FORM (print or type)

_____, Chairman of _____
(name) (Planning Committee or County Commission)

for _____ County makes the following determination regarding the application
(county of proposed project)

for _____
(please give a brief description of the proposed project)

Submitted by _____
(name of applicant)

Is the county or regional solid waste management plan up-to-date? ☐ Yes ☐ No

Date of last review/update _____

Not sure? Call KDHE, 785 296-1600.

Check the boxes that apply: (attach additional pages if necessary)

- ☐ The application **does not** conflict with the county or regional solid waste management plan, and on behalf of the planning committee (or county commission), I **do** support this project.
- ☐ The application **does not** conflict with the county or regional solid waste management plan, however on behalf of the planning committee (or county commission), I **do not** support this project. Please provide a brief explanation of why this project is not supported.
- ☐ The application **does** conflict with the county or regional solid waste management plan. Briefly explain how this project conflicts with the solid waste management plan.
- ☐ I **do not** support this project. Please provide a brief explanation of why this project is not supported.

If the County Commission completed this form, please give an explanation as to why the Planning Committee was not available: _____

(Signature of Chairman)

(Date)

Please return this form to: **Kansas Department of Health and Environment
Bureau of Waste Management / Waste Reduction, Compliance and Enforcement
1000 SW Jackson, Suite 320
Topeka, KS 66612-1366**

FOR BWM GRANTS USE ONLY